## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date:: 07/21/2003

Application Type:: Regular

Subject Matter:: Utility

Title:: APPARATUS AND METHODS FOR

**DELIVERY OF VARIABLE LENGTH STENTS** 

Attorney Docket Number:: 021629-000400US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 24

Small Entity?:: Yes

Petition included?:: No

Secrecy Order in Parent Appl.:: No

#### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: SUNMI

Family Name:: CHEW

City of Residence:: San Jose

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 1599 Martin Avenue

City of Mailing Address:: San Jose

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 95126

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity
Given Name:: BERNARD

Family Name:: ANDREAS

City of Residence:: Redwood City

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 633 California Way

City of Mailing Address:: Redwood City

State or Province of mailing address:: CA
Country of mailing address:: US

Postal or Zip Code of mailing address:: 94062

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: HANSON

Middle Name:: S.

Family Name:: GIFFORD, III

City of Residence:: Woodside

State or Province of Residence:: CA
Country of Residence:: US

Street of Mailing Address:: 3180 Woodside Road

City of Mailing Address:: Woodside

State or Province of mailing address:: CA
Country of mailing address:: US

Postal or Zip Code of mailing address:: 94062

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: RON

Family Name:: FRENCH

City of Residence:: Santa Clara

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 1564 Heatherdale

City of Mailing Address:: Santa Clara

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 95050

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: MARK

Middle Name:: E.

Family Name:: DEEM

City of Residence:: Mountain View

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 685 Sierra Avenue

City of Mailing Address:: Mountain View

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94041

# **Correspondence Information**

Correspondence Customer Number:: 20350

## Representative Information

Representaive Customer Number:: 20350

# **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	10/306,813	11/27/02
10/306,813	Non-Provisional of	60/336,967	12/03/01
10/306,813	Non-Provisional of	60/364,389	03/13/02
	Continuation-in-part of	10/306,620	11/27/02
10/306,620	Non-Provisional of	60/336,607	12/03/01
	Continuation-in-part of	10/306,622	11/27/02
10/306,622	Non-Provisional of	60/336,767	12/03/01